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23347	7590 11/08	3/2010	hav	e its own certificate of	mailing or transmission.	on of formal drawing, must
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				(Depositor's name)		
KEOLI IKOI IKO	MIOLETAKK, P	C 21103-3336				(Signature)
						(Date)
APPLICATION NO.	FILING DATE	ļ	FIRST NAMED INVENTOR	TA S	TORNEY DOCKET NO.	CONFIRMATION NO.
10/533,332	05/02/2005	•	Erwin Pasbrig	,	PG4977USW	5138
TITLE OF INVENTION:		TOK INTROMBED ME	ACAIVILA (1			
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FE	E TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$0	\$1510	\$1510	02/08/2011
EXAMIN	IER	ART UNIT	CLASS-SUBCLASS]		
DOUGLAS, STEVEN O		3771	128-203150			
. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,			
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
3. ASSIGNEE NAME ANI PLEASE NOTE: Unles recordation as set forth i (A) NAME OF ASSIGN テレスト GC の Please check the appropriate	s an assignee is identifn 37 CFR 3.11. Compl TEE Climite C	fied below, no assignee letion of this form is NOT	data will appear on the part a substitute for filing and (B) RESIDENCE: (CITY	atent. If an assignee is assignment. and STATE OR COURT	VTRY) Ex,UK	ocument has been filed for
a. The following fee(s) are Sissue Fee Publication Fee (No s	small entity discount pe	ermitted)	. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) ☐ A check is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached. ☐ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 77-1392 (enclose an extra copy of this form).			
. Change in Entity Status a. Applicant claims S	MALL ENTITY status	above) . See 37 CFR 1.27.	b. Applicant is no long	er claiming SMALL EI	VTITY status. See 37 CF	R 1.27(g)(2).
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Authorized Signature	Pall	Ahre	<u> </u>	Date Nambe	- 05,2010	
Typed or printed name _		- S. WALKE		Registration No		
his collection of informatic n application. Confidentiali ubmitting the completed ap its form and/or suggestions ox 1450, Alexandria, Virgi lexandria, Virginia 22313-	1 100.	R 1.311. The information I.S.C. 122 and 37 CFR 1 JSPTO. Time will vary cen, should be sent to the NOT SEND FEES OR COrsons are required to resp				